

## Initial Information Data Sheet

### Inventor Information:

|                          |                       |
|--------------------------|-----------------------|
| Inventor Given Name:     | Cheryl R.             |
| Family Name:             | Mitchell              |
| Postal Address Line One: | 3445 Lakemist Circle. |
| City:                    | Stockton              |
| State or Province:       | California            |
| Postal or Zip Code:      | 98219                 |
| Citizenship Country:     | US                    |
| Inventor Given Name:     | James B.              |
| Family Name:             | Mitchell              |
| Postal Address Line One: | 1446 Trailwood Avenue |
| City:                    | Manteca               |
| State or Province:       | California            |
| Postal or Zip Code:      | 95336                 |
| Citizenship Country:     | US                    |

### Correspondence Information

|                   |                        |
|-------------------|------------------------|
| Name Line One:    | The Halvorson Law Firm |
| Address Line One: | 405 W. Southern Ave.   |
| Address Line Two: | Ste 1                  |
| City:             | Tempe                  |
| State:            | Arizona                |
| Zip Code:         | 85282                  |
| Telephone:        | (480) 449-3600         |
| Fax:              | (480) 449-3100         |

### Application Information

|                   |  |
|-------------------|--|
| Title Line One:   | ORAL REHYDRATION COMPOSITIONS CONTAINING LIPOSOMES |
| Total Drawings:   | 0 (0 pages)  |
| Formal Drawings:  | No   |
| Application Type: | Utility  |

### Representative Information

|                      |        |
|----------------------|--------|
| Registration Number: | 39,211 |
|----------------------|--------|